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To: Mail Stop ISSUE FEE Commissioner for Patents		FROM: Jon O. Nelson
COMPANY: U.S. Pater		DATE: October 20, 2005
FAX NUMBER: 571-273-2885		TOTAL No. of Pages: 6
RE: Serial No. 10/722,756 Filed: February 5, 2004		Our Reference No.: 06577.00071
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Transmittal Form
Fee Transmittal for FY 2005
Part B – Fee(s) Transmittal, in duplicate

Serial No. 10/722,756 Attorney Docket No. 06577.00071

This collection of Information is required by 37 CFR 1.8. The information is required to obtain or retain a benefit by the public which is a file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 GFR 1.14. This collection is estimated to a e 1.6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Indiminual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450 DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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17:12 FAX 13124635001 BANNER & WITCOFF 2 004/006 OC1 20 2005 PTD/SB/17 (12-04v2) Approved for use through 17/31/2006, OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEF ARTMENT OF COMMERCE the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays: valid OMB control number. Effective on 12/08/2004, to the Consolidated Appropriations Act, 2005 (H.R. 4818), Complete If Known **FEE TRANSMITTAL** Application Number 10/772.758 Filing Date February 5, 2004 for FY 2005 First Named Inventor Nathaniel S. Fox Applicant claims small entity status. See 37 CFR 1.27 Examiner Name Tara L. Mayo Art Unit 3671 **TOTAL AMOUNT OF PAYMENT** (\$) 1,715 Attorney Docket No. 06577.00071 METHOD OF PAYMENT (check all that apply) ☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) : Deposit Account Deposit Account Number: 19-0733 Deposit Account Name: Banner & Witcoff, L. D. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) Indicated below Charge fee(s) indicated below, except for tile filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments Under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES** Small Entity Small Entity Small Entity Fee (\$) <u>Application Type</u> Fee(\$) Fee(\$) Fee(\$) Fee(\$) <u>Fer a Pald (\$)</u> Fee(\$) Utility 300 150 500 250 200 100 Design 200 100 100 50 130 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 250 **ሉ**ስስ 300 Provisional 200 100 Ω n 0 2. EXCESS CLAIM FEES Smal Entity Fee Description F : (\$) Fee (\$) Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 00 Multiple dependent claims 360 80 Total Claims <u>Multiple Depe ident Claims</u> Extra Claims Fee(\$) Fee Paid (\$) - 20 or HP= Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee Paid (\$) Fee(\$) - 3 or HP= ¥ HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee | 'ald (\$) - 100 = _ 150 =(round up to a whole number) x

SUBMITTED BY			
Signature	Jan O. Nelson	Registration No. (Attorney/Agent) 24,566	Tolephone 31::.463.5000
Name (Print/Type)	Jon O. Nelson		Data Oc ober 20, 2005

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PAGE 4/6 * RCVD AT 10/20/2005 6:12:37 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-6/30 * DNIS:2732885 * CSID:13124635001 * DURATION (mm-ss):02-52

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